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Fill in this information to identify your case:			
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)	<u></u>		
Case number (if known)	Chapter you are filing under:		
	✓ Chapter 7		
	Chapter 11		
	Chapter 12		Check if this is an
	Chapter 13		amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name	Debra	
Write the name that is on	First name	First name
your government-issued picture identification (for example, your driver's	Middle name Jackson	Middle name
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last	First name	First name
8 years Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
Only the last 4 digits of your Social	XXX - XX- 9582	xxx - xx-
Security number or federal Individual	OR	OR
Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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D	ebtor 1 Debra First Name	Jackson Middle Name Last Name	Case number (if known)
_	First Name	Middle Name Last Name	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		3610 W. Douglas Blvd. Number Street Apt. 2B	Number Street
		Chicago Illinois 60623	
		City State Zip Code Cook	City State Zip Code
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		PO Box 24527 Number Street	Number Street
		ChicagoIllinois60624CityStateZip Code	City State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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Debtor 1 Debra Jackson Case number (if known) First Name Middle Name Last Name Part 2: Tell the Court About Your Bankruptcy Case 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy Code you Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box. are choosing to file Chapter 7 under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for fee more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for ☐ No. bankruptcy within the last 8 years? Yes. District Northern District of Illinois When 11/13/2015 Case number 15-38764 MM / DD / YYYY When District Case number District When Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Relationship to you Yes. Debtor spouse who is not When District Case number, if known filing this case with MM / DD / YYYY you, or by a business Relationship to you Debtor partner, or by an District Case number, if known affiliate? MM / DD / YYYY 11. Do you rent your No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you? No. Go to line 12. Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

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Debtor 1 Debra Jackson Case number (if known) First Name Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? Ⅵ I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have Ⅵ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Debra Jackson Case number (if known)

First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Debra Jackson Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded ✓ No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **1**-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do vou estimate that you owe? 100-199 10,001-25,000 More than 100,000 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets to be worth? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Debra Jackson Signature of Debtor 1 Signature of Debtor 2 Executed on _ 5/4/2018 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Debra		Jackson	Case number (if	f known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed und	der Chapter 7, 11, 12,	or 13 of title 11, Unite	nave informed the debtor(s) about ad States Code, and have explained the also certify that I have delivered to the
If you are not		-		which § 707(b)(4)(D) applies, certify that I
represented by an	. ,			dules filed with the petition is incorrect.
attorney, you do not	J			
need to file this page.	/s/ Jeremy Nevel		Date	5/4/2018
	Signature of Attorney f	or Debtor		MM / DD / YYYY
	,			
	Jeremy Nevel			
	Printed name			
	Semrad Law Firm			
	Firm name			
	20 S. Clark Street			
	Street			
	28th Floor			
	Chicago		Illinois	60603
	City		State	Zip Code
	Contact phone	3124473707	Email address	jnevel@semradlaw.com
	Bar number		State	
	Dar number		State	

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Fill in this infor	mation to identify your ca	ase:		
Debtor 1	Debra		Jackson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
Case number (If known)			(State)	

Check if this is an
amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	<u>-</u>
1b. Copy line 62, Total personal property, from Schedule A/B	\$10,773.00
1c. Copy line 63, Total of all property on Schedule A/B	\$10,773.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$00.500.00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$23,566.30
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$6,301.15
Your total liabilities	\$29,867.45
Part 3: Summarize Your Income and Expenses	
. Schedule I: Your Income (Official Form 106I)	\$2,493.18
Copy your combined monthly income from line 12 of Schedule I	<u> </u>
i. Schedule J: Your Expenses (Official Form 106J)	\$2,483.00
	\$2,400.00

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Debtor 1 Debra Jackson Case number (if known) First Name Middle Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. \square 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$2,995.16 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: **Total claim** From Part 4 on Schedule E/F, copy the following: \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

9g. Total. Add lines 9a through 9f.

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Fill in this	information	on to identify your c	ase:						
Debtor 1	Del				Jackso	on			
Debtor 2	Firs	st Name	Middle N	lame	Last N	ame			
(Spouse, if fil	ling) Firs	t Name	Middle N	lame	Last N	ame			
United Sta	ates Bankr	uptcy Court for the:	Northern		District of III	linois			
Case num	nber				(8	State)			
Officia	al Forn	n 106A/B					1		Check if this is an amended filing
Sched	dule A	A/B: Prope	erty						12/1
category v responsibl write your	where you le for supp name an	think it fits best. I olying correct infor d case number (if l	Be as complete a mation. If more s known). Answer e	nd ad pace very	ccurate as possib is needed, attac question.	le. If two married pe	ople ar o this f	n one category, list the e filing together, both a orm. On the top of any	are equally
			_			ding, land, or similar			
7. DO 900	No. Go to		quitable interest	iii aii	y residence, built	ang, rand, or similar	proper	.y.	
	Yes. Whe	re is the property?							
1.1	Street add	dress, if available, or	other description	Wh	at is the property Single-family hom Duplex or multi-ur			the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property.
					Condominium or Manufactured or r	cooperative		Current value of the entire property?	Current value of the portion you own?
	Number	Street State	Zip Code		Land Investment proper Timeshare Other	rty		Describe the nature of interest (such as fees the entireties, or a life	simple, tenancy by
				Wh one	e. Debtor 1 only Debtor 2 only Debtor 1 and Deb	•	eck	Check if this is co (see instructions)	ommunity property
						e debtors and another	thic it	om ouch oo loool	
					perty identification	ou wish to add about on number <u>:</u>	this ite	em, such as local	
If you		we more than one, lidderess, if available, or		Wh	at is the property Single-family hom Duplex or multi-ur			the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.
					Condominium or Manufactured or r	•		Current value of the entire property?	Current value of the portion you own?
	Number	Street State	Zip Code		Investment proper Timeshare Other	rty		Describe the nature of interest (such as fees the entireties, or a life	simple, tenancy by
		Ciato	2.9 0006	one	o has an interest b. Debtor 1 only Debtor 2 only Debtor 1 and Deb At least one of the	e debtors and another		(see instructions)	ommunity property

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Debtor 1	Debra		Jackson	Case numbe	r (if known)	
	First Name	Middle Name	Last Name			
1.3	et address, if available, or oth		/hat is the property? Check all that a Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	pply.	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own?
Nur City	nber Street State	Zip Code	Land Investment property Timeshare Other	_	Describe the nature o interest (such as fee s the entireties, or a life	imple, tenancy by
			//ho has an interest in the property? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add all reperty identification number:	ther	(see instructions)	mmunity property
	the dollar value of the port ve attached for Part 1. Wri	•	Il of your entries from Part 1, includere.	ling any entrie	s for pages	
Do you ow you own t	hat someone else drives. If your someone else drives, trucks, tractors, sport util	equitable interest ou lease a vehicle, a	in any vehicles, whether they are realso report it on Schedule G: Executory ycles	-	-	
3.1	Make Model: Year:	Chevrolet Sonic 2014	Who has an interest in the proper one. Debtor 1 only	erty? Check	the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property.
	Approximate mileage: Other information:	58000	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and		Current value of the entire property? \$7323.00	Current value of the portion you own? \$7323.00
3.2	Make Model: Year:		who has an interest in the proper one. Debtor 1 only		the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community p instructions)		Current value of the entire property?	Current value of the portion you own?

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CDIOI I	Debra	Jackson Case number	er (if known)	
	First Name N	fliddle Name Last Name		
3.3	Make Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	the amount of any secu	claims or exemptions. Put ured claims on Schedule D nims Secured by Property. Current value of the portion you own?
3.4	Make Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D</i> aims Secured by Property. Current value of the portion you own?
		ATVs and other recreational vehicles, other vehicles, and according watercraft, fishing vessels, snowmobiles, motorcycle accessor		
	No Yes	mai watercraft, fishing vessels, showindblies, motorcycle accessor	ies	
4.1	Make Model: Year:	Who has an interest in the property? Check one. Debtor 1 only	the amount of any secu	claims or exemptions. Pu ired claims on <i>Schedule L</i> iims <i>Secured by Property.</i>
	Approximate mileage: Other information:	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the	
	Curci información.	At least one of the debtors and another Check if this is community property (see	entire property?	Current value of the portion you own?
4.2	Make Model: Year:		Do not deduct secured the amount of any secu	
4.2	Make Model:	Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured the amount of any secu	portion you own? claims or exemptions. Pared claims on Schedule

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Debtor 1 Debra Jackson Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Furniture (Stove & Refrigerator) \$1500.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Used Electronics (2 tvs, computer, cell phone) Yes. Describe... \$600.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Used Clothing (Clothing & Shoes) \$200.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, aold, silver No Yes. Describe... Costume Jewelry \$100.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2400.00 for Part 3. Write that number here

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Debtor 1 Debra Jackson Case number (if known) First Name Middle Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$200.00 17.1. Checking account: Chase Bank 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: Mercer Marketplace card \$0.00 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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Deb	tor 1 Debra First Name	Middle Name	Jackson Last Name	Case number (if known)	
20		orate bonds and other negotial	Last Name	instruments	
20.	Negotiable instruments	include personal checks, cashiers'	checks, promissory note	es, and money orders.	
		ents are those you cannot transfer	to someone by signing	or delivering them.	
	No No				
	Yes. Give specific information about	Issuer name:			
	them				
21.	Retirement or pension		thrift savings accounts	or other pension or profit-sharing plans	
	No No	in, Ellion, Reogn, 401(ii), 400(b)	, tillit savings accounts,	or other perision or profit straining plans	
	Yes. List each	Type of account:	Institution name:		
	account separately.	401(k) or similar plan:			
	soparatory.	Pension plan:			
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			
22.	Security deposits and				
		d deposits you have made so that with landlords, prepaid rent, public			
	companies, or others				
	No		Institution name:		
	✓ Yes	Electric:			
		Gas:			
		Heating oil:			
		Security deposit on rental unit:	WJ Management		\$850.00
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
		Other:			
23.	_	or a periodic payment of money to	you, either for life or for	a number of years)	
	✓ No	Issuer name and description:			
	Yes				
					-

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Debte	or 1 Debra		Jackson	Case number (if known)	
	First Name	Middle			
24.		ucation IRA, in an acc)(1), 529A(b), and 529(ount in a qualified ABLE program, or und b)(1).	der a qualified state tuition program.	
	- N	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Instit	tution name and descrip	tion. Separately file the records of any intere	ests.11 U.S.C. § 521(c):	
	Yes				
			_		
25.	Truete aquitable	or futuro intorocte in n	property (other than anything listed in lin	a 1) and rights or newers	
25.	exercisable for you		roperty (other than anything listed in hir	e 1), and rights of powers	
	✓ No				
	Yes. Describe				
	_				
26.	Patents convright	ts trademarks trade	secrets, and other intellectual property		
			s, proceeds from royalties and licensing agre	eements	
	✓ No				
	Yes. Describe				
	_				
27.	Licenses, franchis	es, and other general	intangibles		
			ses, cooperative association holdings, liquor	licenses, professional licenses	
	✓ No				
	Yes. Describe				
Mon	ev or property o	wed to vou?			Current value of the
Mon	ey or property o	wed to you?			Current value of the portion you own?
Mon	ney or property o	wed to you?			portion you own? Do not deduct secured
	ney or property on				portion you own?
	Tax refunds owed t				portion you own? Do not deduct secured
		o you		Federal:	portion you own? Do not deduct secured
	Tax refunds owed t ✓ No Yes. Give specif about ther	o you ic information n, including whether			portion you own? Do not deduct secured claims or exemptions. \$0.00
	Tax refunds owed t No Yes. Give specif about ther you alread	o you ic information		Federal: State:	portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds owed t No Yes. Give specif about ther you alread and the tax	o you ic information n, including whether y filed the returns			portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds owed t No Yes. Give specif about ther you alread and the tax Family support	o you ic information n, including whether y filed the returns x years	pousal support, child support, maintenance	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed t No Yes. Give specification about ther you alread and the tax Family support Examples: Past due	o you ic information n, including whether y filed the returns x years	pousal support, child support, maintenance	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed t No Yes. Give specif about ther you alread and the tax Family support Examples: Past due	o you ic information n, including whether y filed the returns x years	pousal support, child support, maintenance	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed t No Yes. Give specif about ther you alread and the tax Family support Examples: Past due	o you ic information n, including whether y filed the returns x years	pousal support, child support, maintenance	State: Local: e, divorce settlement, property settlemen Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t
28.	Tax refunds owed t No Yes. Give specif about ther you alread and the tax Family support Examples: Past due	o you ic information n, including whether y filed the returns x years	pousal support, child support, maintenance	State: Local: e, divorce settlement, property settlemen Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00
28.	Tax refunds owed t No Yes. Give specif about ther you alread and the tax Family support Examples: Past due	o you ic information n, including whether y filed the returns x years	pousal support, child support, maintenance	State: Local: e, divorce settlement, property settlemen Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t
28.	Tax refunds owed t No Yes. Give specif about ther you alread and the tax Family support Examples: Past due	o you ic information n, including whether y filed the returns x years	pousal support, child support, maintenance	State: Local: e, divorce settlement, property settlemen Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00
28.	Tax refunds owed t No Yes. Give specif about ther you alread and the tax Family support Examples: Past due	o you ic information n, including whether y filed the returns x years	pousal support, child support, maintenance	State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00
29.	Tax refunds owed t No Yes. Give specif about ther you alread and the ta: Family support Examples: Past due No Yes. Give specif Other amounts son	o you ic information n, including whether y filed the returns x years or lump sum alimony, s ic information		State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed t No Yes. Give specification about their you alread and the tax Family support Examples: Past due No Yes. Give specification Other amounts son Examples: Unpaid w	o you ic information n, including whether y filed the returns x years or lump sum alimony, s ic information	e payments, disability benefits, sick pay, vac	State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed t ✓ No Yes. Give specif about ther you alread and the tax Family support Examples: Past due ✓ No Yes. Give specif Other amounts son Examples: Unpaid w Social Sec	o you ic information n, including whether y filed the returns x years or lump sum alimony, s ic information		State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed t ✓ No Yes. Give specif about ther you alread and the tax Family support Examples: Past due ✓ No Yes. Give specif Other amounts son Examples: Unpaid w Social Sec	o you ic information n, including whether y filed the returns x years or lump sum alimony, s ic information	e payments, disability benefits, sick pay, vac	State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed t ✓ No Yes. Give specif about ther you alread and the tax Family support Examples: Past due ✓ No Yes. Give specif Other amounts son Examples: Unpaid w Social Sec	o you ic information n, including whether y filed the returns x years or lump sum alimony, s ic information	e payments, disability benefits, sick pay, vac	State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb ⁻	tor 1 Debra	Jackson	Case number (if known)	
	First Name Middle Na	ame Last Name		
31.	Interests in insurance policies Examples: Health, disability, or life insurance;	health savings account (HSA); credit, hom	eowner's, or renter's insurance	
	No ✓ Yes. Name the insurance company	Company name:	Beneficiary:	Surrender or refund value:
	of each policy and list its value	Term Life Insurance through Employe	er	\$0.00
32.	Any interest in property that is due you from	om someone who has died		
02.	If you are the beneficiary of a living trust, experimental property because someone has died.		r are currently entitled to receive	
	✓ No			
	Yes. Describe			
33.	Claims against third parties, whether or n Examples: Accidents, employment disputes,		emand for payment	
	✓ No	, G		
	Yes. Describe			
34	Other contingent and unliquidated claims	s of every nature, including counterclai	ms of the debtor and rights	
	to set off claims	,		
	✓ No ✓ Yes. Describe			
35.	Any financial assets you did not already li	st		
	✓ No ✓ Yes. Describe			
	Too. Boodings			
36.	Add the dollar value of all of your entries			\$1050.00
	for Part 4. Write that number here		>	
	_			
Part	5: Describe Any Business-Related F Do you own or have any legal or equitable		rest In. List any real estate in Part	l
	No. Go to Part 6.	, , , , , , , , , , , , ,	Cu	rrent value of the
	Yes. Go to line 38.		Do	rtion you own? not deduct secured claims exemptions
38.	Accounts receivable or commissions you	already earned	Oi	exemptions
	No Von Departing			
	Yes. Describe			
39.	Office equipment, furnishings, and supplie Examples: Business-related computers, softw		nes, rugs, telephones, desks, chairs. electro	nic devices
	✓ No		<u> </u>	
	Yes. Describe			

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Deb ⁻	otor 1 Debra	Jackson	Case number (if known)	
	First Name Middle Na	me Last Name		
40.	Machinery, fixtures, equipment, supplies y	ou use in business, and tools of your	trade	
	□ Na			
	✓ No			
	Yes. Describe			
41.	Inventory			
	No No			
	Yes. Describe			
42.	Interests in partnerships or joint ventures			
	✓ No			
	Ver Cive execitie	Name of entity:	% of ownership:	
	Yes. Give specific information about			
	them	-		-
				
		-		
43. (Customer lists, mailing lists, or other comp	ilations		
	No.			
	No			
	Yes. Do your lists include personally iden	tifiable information (as defined in 11 U.S.	C. § 101(41A))?	
	□ No			
	No			
	Yes. Describe			
44.	Any business-related property you did not	already list		
	No No			
	Yes. Give specific			
	information			
		-		_
45 A	Add the dollar value of all of your entries fro	m Part 5 including any entries for na	res vou have attached	
	art 5. Write that number here			
▶				
Part	t 6: Describe Any Farm- and Comme	rcial Fishing-Related Property Ye	ou Own or Have an Interest In.	
	If you own or have an interest in farmland, lis	t it in Part 1.		
46	Do you own or hove ony logal or aguitable	interest in any form, or commercial	fishing related property?	
46.	Do you own or have any legal or equitable	interest in any larin- or commercial	iisiiiig-related property:	
	No. Go to Part 7.			Current value of the
	Yes. Go to line 47.			portion you own? Do not deduct secured claims
				or exemptions
17	Farm animals			
41.	Examples: Livestock, poultry, farm-raised fish			
	Z.a., ploo. Elitotoon, pounty, faith raised fish			
	✓ No			
	Yes. Describe			
	_			

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Debt	or 1 Debra First Name		ackson st Name	Case number (if known)	
48.	Crops-either growing of		st ivanie		
	No No				
	Yes. Describe				
49.	Farm and fishing equip	oment, implements, machinery, fixture	s, and tools of trade		
	No No	, , , , , , , , , , , , , , , , , , ,	,		
	Yes. Describe				
	_				
50.	Farm and fishing suppl	ies, chemicals, and feed			
	✓ No				
	Yes. Describe				
	_				
51.	Any farm- and commer	rcial fishing-related property you did n	ot already list		
	✓ No				
	Yes. Describe				
52 A	dd the dellar value of al	I of your entries from Part 6, including	any entries for pages	you have attached	
		here		-	
•				L	
Part 7	7: Describe All Pro	perty You Own or Have an Interes	st in That You Did N	lot List Above	
53.		perty of any kind you did not already lis	st?		
		s, country club membership			
	✓ No Yes. Give specific				
	information				
54. A	dd the dollar value of al	I of your entries from Part 7. Write tha	t number here		>
Part 8	List the Totals of	Each Part of this Form			
	No. 1 d. Total control of	P 0			
55. F	art 1: Total real estate	, line 2			
56. p	oart 2 total vehicles, lin	e 5	\$7323.00		
57. P	art 3: Total personal an	d household items, line 15	\$2400.00	•	
58. P	art 4: Total financial as	sets, line 36	\$1050.00		
59. F	Part 5: Total business-re	elated property, line 45	, , , , , , , , , , , , , , , , , , , 		
60. F	Part 6: Total farm- and f	ishing-related property, line 52			
	Part 7: Total other prope				
		Add lines 56 through 61.			
V I	TIAL POLICITION PROPERTY.		\$10773.00	Copy personal property total	+ \$10773.00
					\$10773.00
63. T	otal of all property on S	chedule A/B. Add line 55 + line 62			Ψ10770.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	Debra		Jackson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the	: Northern	District of Illinois	
			(State)	
Case number (If known)				
(II KHOWH)				
Ott: o: ol	Faure 1000			
Official	Form 106C			

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pai	Part 1: Identify the Property You Claim as Exempt							
1.	I. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.							
	You are claiming state and federal r	nonbankruptcy exemp	otions. 11 U.S.C. § 522(b)(3)					
	You are claiming federal exemption	s. 11 U.S.C. § 522(b)(2	2)					
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption				
	Brief description: Term Life Insurance through Employer	\$0.00	\$0 100% of fair market value, up to any	735 ILCS 5/12-1001(f)				
	Line from Schedule A/B: 31		applicable statutory limit					
	Brief description:	\$200.00	\$200.00	735 ILCS 5/12-1001(b)				
	Checking account, Chase Bank		100% of fair market value, up to any	_				
	Line from Schedule A/B: 17		applicable statutory limit					
3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes								

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Debtor 1 Debra Jackson Case number (if known) First Name Middle Name Last Name **Additional Page** Part 2: Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(a) \$200.00 description: \checkmark \$200.00 **Used Clothing (Clothing** 100% of fair market value, up to any & Shoes) applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$600.00 description: $\overline{}$ \$600.00 Used Electronics (2 tvs, 100% of fair market value, up to any computer, cell phone) applicable statutory limit Line from Schedule A/B: 07 735 ILCS 5/12-1001(b) Brief description: \$100.00 $\overline{}$ \$100.00 **Costume Jewelry** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$850.00 description: \$850.00 Security deposit on 100% of fair market value, up to any rental unit, WJ applicable statutory limit Management Line from Schedule A/B: 22 735 ILCS 5/12-1001(b) Brief \$0.00 description: \checkmark

100% of fair market value, up to any

applicable statutory limit

Other financial account,

17

Mercer Marketplace

card
Line from
Schedule A/B:

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Fill in	this information to identify y	our case:		I		
Debto	or 1 Debra		Jackson			
Dobto	First Name	Middle Name	Last Name			
Debto						
(Spous	e, if filing) First Name	Middle Name	Last Name			
United	d States Bankruptcy Court for	the: Northern	District of Illinois (State)			
Case (If know	number /n)		(Otate)			
Offi	icial Form 106	D				Check if this is a amended filing
Scl	nedule D: Cre	_ ditors Who Ha	ve Claims Secur	ed by Prop	ertv	12/1
			le are filing together, both are equ			
	-		mber the entries, and attach it to	•		
name	and case number (if known).				
1. [Oo any creditors have clai	ims secured by your proper	rty?			
	No. Check this box and	submit this form to the court	with your other schedules. You have	ve nothing else to rep	ort on this form.	
Ī	Yes. Fill in all of the infor	mation below.				
Part	1: List All Secured Clai	ms				
2.		a creditor has more than one se	cured claim, list the graditor	Column A	Column B	Column C
۷.			rticular claim, list the other creditors	Amount of claim	Value of	Unsecured
	in Part 2. As much as possib	ole, list the claims in alphabetical	order according to the creditor's	Do not deduct the	collateral	portion
	name.			value of collateral.	that supports	If any
_	ACCEPTANCE NOW				this claim	
2.1	ACCEPTANCE NOW Creditor's Name	Describe the property	that secures the claim:	\$3,689.00	\$1,500.00	\$2,189.00
	5501 Headquarters Dr	Furniture Loan				
	Number Street ATTN: Acceptance Now	_	e, the claim is: Check all that apply.			
	Customer Service	Contingent				
	Plano TX 75	Unliquidated				
	City State ZIP					
	Who owes the debt? Check	one. Nature of lien. Check	all that apply.			
	✓ Debtor 1 only	An agreement you	made (such as mortgage or secured			
	Debtor 2 only	car loan)				
	Debtor 1 and Debtor 2 of		n as tax lien, mechanic's lien)			
	At least one of the debto	ors Judgment lien from	n a lawsuit			
	Check if this claim rel	ates Other (including a r	ight to offset) Furniture Loan			
	to a community debt	Last 4 digits of accou	int number 0315			
	Date debt was 4/20 incurred	<u>14</u>				
2.2	Americredit Financial Services	s, dba Describe the property	that secures the claim:	\$19,877.30	\$7,323.00	\$12,554.30
	GM Financial Creditor's Name		•	· · · · · · · · · · · · · · · · · · ·		<u> </u>
	PO Box 183853	Chevy Sonic Value: \$7 As of the date you file	, s2s.00 •, the claim is: Check all that apply.			
	Number Street	Contingent	,			
	-	Unliquidated				
		096 Disputed				
	City State ZIP Who owes the debt? Check	Code -	all that apply			
	✓ Debtor 1 only	Tractare of from officer	,			
	Debtor 2 only	car loan)	made (such as mortgage or secured			
	Debtor 1 and Debtor 2 of	Statutory lien (such	n as tax lien, mechanic's lien)			
	At least one of the debto		n a lawsuit			
	and another	Other (including a				
	Check if this claim rel to a community debt	ates —	- · · · · · · · · · · · · · · · · · · ·			
	Date debt was	Last 4 digits of accou	int number			
	incurred					
	Add the dollar val	ue of your entries in Column A	A on this page. Write that number	\$23,566.30		

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Fill i	n this inforr	nation to identify your c	ase:						
Deb	tor 1	Debra		Jackson					
		First Name	Middle Name	Last Name					
	tor 2 use, if filing)	Et al Name	NACALAHA NIAMA	L N					
(Spoi	use, ii iiiirig)	First Name	Middle Name	Last Name	1				
Unit	ed States B	ankruptcy Court for the:	Northern	District of Illinois					
Case (If knd	e number own)				<u></u>				
Off	icial Fo	orm 106E/F					Che	ck if this is an	amended filing
Sc	hedu	le E/F: Cre	ditors Who	Have Ur	secure	d Claims			12/15
other Form clain the e know	r party to a 1 106A/B) a ns that are entries in th n).	ny executory contracts nd on Schedule G: Exe listed in Schedule D: C ne boxes on the left. At	ble. Use Part 1 for credito s or unexpired leases that cutory Contracts and Une treditors Who Hold Claims tach the Continuation Pa	could result in a expired Leases (O s Secured by Prop	claim. Also list e fficial Form 1060 e <i>rty</i> . If more spa	executory contracts a). Do not include a ce is needed, copy	on <i>Schedu</i> ny creditor the Part yo	<i>ile A/B: Prop</i> s with partia ou need, fill i	perty (Official ally secured t out, number
1.	-	editors have priority un ão to Part 2.	secured claims against y	ou?					
2.	2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)							rity amounts.	
							Total claim	Priority amount	Nonpriority amount

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Debtor 1 Debra Jackson Case number (if known) First Name Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **V** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** AMER FST FIN 4.1 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 3515 N. Ridge Rd, Suite 200 When was the debt incurred? 7/2017 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Wichita 67205 Kansas City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify 13 InstallmentLoan - Notice only Is the claim subject to offset? No Yes **AMERIMARK** \$74.00 Last 4 digits of account number 5032 Nonpriority Creditor's Name When was the debt incurred? 3/2012 PO BOX 2845 Number Street As of the date you file, the claim is: Check all that apply. Contingent MONROE 53566 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only $\overline{}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset? **V** No Yes CAP ONE 4.3 \$0.00 Last 4 digits of account number 5950 Nonpriority Creditor's Name When was the debt incurred? 8/2011 26525 N RIVERWOODS BLVD Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated METTAWA 60045 Illinois City Disputed State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only $\overline{}$ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify CreditCard - Notice only Is the claim subject to offset? **✓** No

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Debtor 1 Debra Jackson Case number (if known)
First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

Part 2	Your NONPRIORITY Unsecured Claims - Continuation	Page	
	After listing any entries on this page, number them beginning wit	h 4.5, followed by 4.6, and so forth.	Total claim
4.4	ComEd	Last 4 digits of account number	\$161.21
	Nonpriority Creditor's Name 3 Lincoln Center	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Bankruptcy Section	Contingent	
	Oakbrook Terrace Illinois 60181	Unliquidated	
	Oakbrook Terrace Illinois 60181 City State Zip Code	Disputed	
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	Student loans	
	<u></u>	Obligations arising out of a separation agreement or	
	Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	Other. Specify Past Due Electric Bill	
	Is the claim subject to offset?		
	✓ No		
	Yes		
4.5	CREDIT ONE BANK NA Nonpriority Creditor's Name	Last 4 digits of account number0004	\$0.00
	PO BOX 98875	When was the debt incurred? 2/2012	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	LAS VEGAS Nevada 89193	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	
	블	debts	
	Check if this claim relates to a community debt	✓ Other. Specify CreditCard - Notice only	
	Is the claim subject to offset?		
	Yes		
4.6	Direct Charge		¢110.00
4.6	Nonpriority Creditor's Name	Last 4 digits of account number	\$112.80
	PO Box 800849 Number Street	When was the debt incurred? 12/15/2015	
	c/o Creditors Bankruptcy Service	As of the date you file, the claim is: Check all that apply.	
	Go Ground Burning Solvido	Contingent	
	Dallas Texas 75380	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts Other Specify Credit Card	
	Is the claim subject to offset?	Other. Specify Credit Card	
	No		
	Yes		

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 Debtor 1 First Name
 Debra Jackson Last Name
 Case number (if known)

Part 2	Your NONPRIORITY Unsecured Claims - Continuation	n Page	
	After listing any entries on this page, number them beginning w	ith 4.5, followed by 4.6, and so forth.	Total claim
4.7	Exeter Finance LLC Nonpriority Creditor's Name PO BOX 166097 Number Street	Last 4 digits of account number 1001 When was the debt incurred? 3/2010 As of the date you file, the claim is: Check all that apply.	\$0.00
	IRVING Texas 75016 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify 067 Automobile - Notice only	
4.8	I C SYSTEM INC Nonpriority Creditor's Name PO BOX 64378 Number Street	- Last 4 digits of account number 7001 When was the debt incurred? 1/2013 As of the date you file, the claim is: Check all that apply.	\$287.00
	SAINT PAUL Minnesota 55164 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL Other. Specify PAYMENT DATA	
4.9	LVNV Funding, LLC its successors and assign as assignee of FNBM, LLC Nonpriority Creditor's Name PO Box 10587 Number Street	Last 4 digits of account number 9751 When was the debt incurred? 07/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$1,671.25
	Greenville City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify	

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Debtor 1 Debra Jackson Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 MDNGHT VLVT \$0.00 5858 Last 4 digits of account number Nonpriority Creditor's Name 1112 7TH AVE POB 2816 When was the debt incurred? 3/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated MONROE Wisconsin 53566 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify CreditCard - Notice only Is the claim subject to offset? No ◪ ☐ Yes 4.11 Midland Credit Management, Inc. as agent for Midland Funding \$770.56 6855 Last 4 digits of account number LLC When was the debt incurred? 01/2013 Nonpriority Creditor's Name c/o Raymond Joseph PO Box 2011 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Warren Michigan 48090 Disputed City State Zip Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Debtor 1 only Student loans Obligations arising out of a separation agreement or Debtor 2 only divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Other. Specify 001 Collection ◪ Check if this claim relates to a community debt Is the claim subject to offset? **✓** No Yes Monroe & Main c/o Creditors Bankruptcy Service 4.12 \$285.66 Last 4 digits of account number 5858 Nonpriority Creditor's Name When was the debt incurred? 2/2012 P.O. Box 800849 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **Dallas** Texas 75380 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ CreditCard

✓ No Yes

Is the claim subject to offset?

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Debtor 1 Debra Jackson Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 Montgomery Ward c/o Creditors Bankruptcy Service \$207.12 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 800849 When was the debt incurred? 05/2010 Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 75380 Dallas Texas City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Credit Card Is the claim subject to offset? No ◪ Yes NISSAN MOTOR ACCEPTANC \$0.00 0001 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3/2011 2901 KINWEST PKWY As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **IRVING** Texas 75063 Disputed State Zip Code Who incurred the debt? Check one Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify 061 Automobile - Notice only Is the claim subject to offset? **✓** No Yes Peoples Gas Light & Coke Co. 4.15 \$214.61 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 200 E. Randolph St. Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60601 Chicago City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Past Due Gas Bill Other. Specify

✓ No ☐ Yes

Is the claim subject to offset?

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Debtor 1 Debra Jackson Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** PORTFOLIO RC 4.16 \$577.00 8791 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 5/2015 120 Corporate Boulevard Number Street As of the date you file, the claim is: Check all that apply. Contingent 23502 Norfolk Virginia Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? ✓ **ORIGINAL CREDITOR: 08 ✓** No Other. Specify CITIBANK N A Yes 4.17 Portfolio Recovery Associates, LLC Successor to Citibank (Best \$675.65 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 05/2015 POB 41067 As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated 23541 Norfolk Virginia Disputed City State Zip Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Other. Specify _ 001 UnknownLoanType Check if this claim relates to a community debt Is the claim subject to offset? **✓** No Yes 4.18 Quantum3 Group LLC as agent for Comenity Bank \$1,264.29 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2015 & 2016 P.O. Box 788 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Washington 98083 Kirkland City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims

✓ No

Yes

At least one of the debtors and another

Is the claim subject to offset?

Check if this claim relates to a community debt

Other. Specify

Debts to pension or profit-sharing plans, and other similar

Payday Loans

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ebtor 1	Debra First Name	Middle Name	Jackson Last Name	Case number (if known)				
rt 2:	Your NONPRIORITY	Unsecured Claim	s - Continuation F	Page				
-	After listing any entries or	n this page, number	them beginning with	1 4.5, followed by 4.6, and so forth.	Total claim			
1 6	WEBBNK/FHUT Nonpriority Creditor's Name 5250 RIDGEWOOD ROA Number Street			Last 4 digits of account number 7169 When was the debt incurred? 8/2010 As of the date you file, the claim is: Check all that apply.	\$0.00			
_			56303 Zip Code	Contingent Unliquidated Disputed				
	Who incurred the debt? Cl Debtor 1 only Debtor 2 only	heck one.		Type of NONPRIORITY unsecured claim: Student loans				
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No			Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
				Debts to pension or profit-sharing plans, and other similar debts				
				Other. Specify CreditCard - Notice only				

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ebtor 1	First Name Middle Name			Jackson	Case number (if known)		
			ddle Name	Last Name			
rt 3:	List Others to E	Be Notified Ab	out a Debt That Yo	ou Already Listed	d		
colle colle cred	ection agency is t ection agency he litors here. If you NTGOMERYWD	trying to collect re. Similarly, if y	from you for a debt you have more than o	you owe to someon one creditor for any e notified for any de	for a debt that you already listed in Parts 1 or 2. For example, if a ne else, list the original creditor in Parts 1 or 2, then list the y of the debts that you listed in Parts 1 or 2, list the additional lebts in Parts 1 or 2, do not fill out or submit this page. y in Part 1 or Part 2 did you list the original creditor?		
	1112 7th Ave. Number Street		Line 4.13	one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Mor	nroe	Wisconsin	53566	_ Last 4 digits of	account number 6290		
City	City State Zip Code		Zin Code				

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Jackson Debtor 1 Debra Case number (if known)

FIRST Nar	ne Middle Name Last Name		
Part 4: Add th	ne Amounts for Each Type of Unsecured Claim		
	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	s for s	r statistical reporting purposes only. 28 U.S.C. §159.
			Total claims
Total claims from Part 1	6a. Domestic support obligations.	6a.	a. \$0.00
	6b. Taxes and certain other debts you owe the government	6b.	b. \$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00 d.
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00
			Total claims
Total claims from Part 2	6f. Student loans	6f.	f\$0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	g. \$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	h. \$0.00
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$6,301.15
	6j. Total. Add lines 6f through 6i.	6j.	\$6,301.15

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Fill in this infor	mation to identify your c	ase:			
Debtor 1	Debra		Jackson		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name	,	
United States Bankruptcy Court for the:		Northern	District of Illinois		
			(State)		
Case number (If known)					

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or com	pany with whom you have	the contract or lease	State what the contract or lease is for
2.1	WJ Managemen	nt		Residential Lease,
	Name			Debtor is Lessee,
				1-Year Lease
	5225 West Madison Street			
	Number	Street		
	Chicago	Illinois	60644	
	City	State	Zip Code	

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		50	ournoin i aç	JO O 1 O1 1 I		
Fill in this info	ormation to identify your o	case:				
Debtor 1	Debra		Jackson			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	Northern	District of Illinois			
			(State)			
Case number (If known)						
Official	Form 106H					Check if this is an amended filing
Official	FUIII 100H					
Schedu	le H: Your Cod	debtors				12/15
the entries in known). Answ	the boxes on the left. A ver every question. nave any codebtors? (If y		e to this page. On the	top of any Additi	ional Pages, write your na	age, fill it out, and number ame and case number (if
Idaho, Lo		lived in a community proxico, Puerto Rico, Texas, W			roperty states and territories	s include Arizona, California,
		er spouse, or legal equiva	Jont live with you at the	a tima?		
	s. Dia your spouse, iorni No	er spouse, or legal equiva	uent iive with you at th	e une:		
	-		. 150	E		
Ш	res. In which communi	ly state or territory did you	ı iive?	Fill in the n	ame and current address of	r that person.
	Name of your spouse,	former spouse, or legal equ	ivalent			
	Number Street					
	City	State	Zip (Code		
			·			
3. In Colum	nn 1, list all of your code	btors. Do not include you	r spouse as a codebto	r if your spouse	is filing with you. List the	person shown in line 2

In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2
again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D),
Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
	Check all schedules that apply:

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				9		
Fill in this in	nformation to identify	your case:				
Debtor 1	Debra		Jackso			
.	First Name	Middle Name	Last N	ame	Che	ck if this is:
Debtor 2 (Spouse, if filing	ng) First Name	Middle Name	Last N	ame	— I	An amended filing
						A supplement showing post-petition chapter 1
United State the:	s Bankruptcy Court for	Northern	District of Illi	nois itate)		expenses as of the following date:
Case number	er		(0	itate)		
(If known)						MM / DD / YYYY
Official	Form 106I					
Schedu	ıle I: Your İn	come				12/1
spouse. If m number (if l		l, attach a separate she y question.				not include information about your ional pages, write your name and case
-	our employment		Debtor 1			Debtor 2
informat	tion.	Employment status	- Emplo	wod		□ Employed
-	ave more than one job,	,	✓ Emplo	-		Employed Not Employed
attach a separate page with information about additional employers. Occupation			Not Employed			Not Employed
		Occupation	Dietary Supervisor			
	oart time, seasonal, or	Employer's name	Kindred Ho	ospital - Chicag	o North	
seir-emp	self-employed work. Employer's address Occupation may include student or homemaker, if it applies. Employer's address Number Str		2544 W M	Iontrose Ave		
•				t Number Street		
			Chicago City	Illinois State	60618 Zip Code	City State Zip Code
		How long employed there?				
Part 2: G	ive Details About N	Nonthly Income				
Estimate n spouse unle	nonthly income as of tess you are separated.	the date you file this form	-	information for	-	write \$0 in the space. Include your non-filing or that person on the lines below. If you need For Debtor 2 or non-filing spouse
deduct be.	tions.) If not paid monthly	ary, and commissions (before, calculate what the monthly		2.	\$3,522.68	
3. Estima	ate and list monthly ove	rtime pay.		3.	+ \$0.00	
4. Calcul	late gross income. Add I	ine 2 + line 3.		4.	\$3,522.68	

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Deb	tor 1Debra First Name	Middle Name	Jackson Last Name		Case number	r <i>(if</i>		
	riist Name	Middle Name	Last Name		known) For Debtor 1	For Debtor 2 or non-filing spouse		
C	opy line 4 here		→	4.	\$3,522.68			
	st all payroll dedu							
		and Social Security deductions		5a.	\$735.48			
5	b. Mandatory con	tributions for retirement plans		5b.	\$0.00			
5	c. Voluntary contr	ibutions for retirement plans		5c.	\$0.00			
5	d. Required repay	ments of retirement fund loans		5d.	\$0.00			
5	e. Insurance			5e.	\$294.02			
5	f. Domestic suppo	ort obligations		5f.	\$0.00			
5	g. Union dues			5g.	\$0.00			
5	h. Other deductio	ns. Specify:		5h. +	\$0.00 +			
6. A 0 +5h.		luctions. Add lines 5a + 5b + 5c + 5d + 5e +5	5f + 5g	6.	\$1,029.49			
7. C a	alculate total mor	nthly take-home pay. Subtract line 6 from lin	e 4.	7.	\$2,493.18			
8. Li	st all other incom	e regularly received:						
8	business, profes	-						
		nt for each property and business showing rdinary and necessary business expenses, and	d					
	the total monthly	net income.		8a.	\$0.00			
8	b. Interest and div	vidends		8b.	\$0.00			
8	dependent regu	-						
		spousal support, child support, maintenance nt, and property settlement.		8c.	\$0.00			
8	d. Unemployment	compensation		8d.	\$0.00			
8	e. Social Security			8e.	\$0.00			
8	Include cash assi cash assistance t	ent assistance that you regularly receive istance and the value (if known) of any non-hat you receive, such as food stamps (benefit mental Nutrition Assistance Program) or is		8f.	\$0.00			
8	g. Pension or reti	rement income		8g.	\$0.00			
8	h. Other monthly	income. Specify:		8h. +	\$0.00 +			
9. A	dd all other incom	e Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g	+ 8h.	9.	\$0.00			
		income. Add line 7 + line 9. e 10 for Debtor 1 and Debtor 2 or non-filing s		10.	\$2,493.18 +		=	\$2,493.18
Ir fr	nclude contributions iends or relatives.	ular contributions to the expenses that yos from an unmarried partner, members of you amounts already included in lines 2-10 or amounts	r household	d, your	dependents, your roomn	•		
s	specify:						11. +	\$0.00
		the last column of line 10 to the amount					12.	¢2.402.10
V	viile liial amount or	n the Summary of Schedules and Statistical Sc	uninary of	vertain i	∟ıaышиеs апо кеlateo Da	иа, и и арриеs		\$2,493.18 Combined monthly income
13. [No. Yes. Explain:	increase or decrease within the year after	you file th	is form	?			sitting intollie
L	res. Explain:							

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Debtor 1Debra					Case number (if		
First Name	Middle Name	ddle Name Last Name k		known)	nown)		
Part 1: Describe Employme	ent						
	Debtor 1			Debtor 2			
Employment status	✓ Employed			Employed			
	Not Employed			Not Employe	ed		
Occupation	Dietary Supervisor						
Employer's name	Kindred Hospital -	Chicago North					
Employer's address	2544 W Montrose Ave						
	Number Street			Number Street			
	Chicago	Illinois	60618				
	City	State	Zip Code	City	State	Zip Code	
How long employed there?		<u></u>					

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		D00	cument Page 38 of 7	1	
Fill in this infor	mation to identify your	case:			
Debtor 1	Debra		Jackson		
D. I	First Name	Middle Name	Last Name	Check if this is:	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended filin	g
United States B	ankruptcy Court for the	: Northern	District of Illinois		owing post-petition chapter 13
	, ,		(State)	expenses as of the	he following date:
Case number (If known)	-			MM / DD / YYYY	
Official	Form 106J				
Schedul	e J: Your Exp	enses			12/1
(if known). Ans	wer every question. cribe Your Househo		is form. On the top of any addition	nai pages, write your na	ime and case number
1. Is this a join	nt case?				
✓ No. Go	to line 2				
Yes. Do	oes Debtor 2 live in a s	eparate household?			
	No				
	Yes. Debtor 2 must f	ile Official Forms 106J-2, Exp	enses for Separate Household of Del	btor 2.	
2. Do you have	e dependents?	lo			
Do not list D Debtor 2.		es. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	enses include	lo			
than		_			
yourself and dependents	ı youi	'es			
Part 2: Estir	nate Your Ongoing	Monthly Expenses			
	f a date after the bank		s you are using this form as a supp upplemental Schedule J, check th		
		cash government assistanc it on Sc <i>hedule I: Your Incon</i>			Your expenses
	or home ownership ex or the ground or lot. 4.	rpenses for your residence.	Include first mortgage payments and	d	*************************************
If not incl	uded in line 4:				
4a. Real es	state taxes				4a \$0.00

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Debra Jackson Case number (if known) Last Name

	First Name	Middle Name Last Name		
Sea				Your expenses
6a. Electricity, heat, natural gas 6a. \$210.00 6b. Water, sewer, garbage collection 6b. \$0.00 6c. Telephone, cell phone, Internet, satellitie, and cable services 6c. \$100.00 6d. Other. Specify: 6d \$0.00 7. Food and housekeeping supplies 7. \$334.00 8. Childcare and children's education costs 8. \$0.00 9. Ciothing, laundry, and dry cleaning 9. \$125.00 10. Personal care products and services 11. \$60.00 11. Medical and dental expenses 11. \$60.00 11. Medical and dental expenses 11. \$60.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$350.00 Do not include car payments 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15. \$0.00 15b. Health insurance deducted from your pay or included in lines 4 or 20. \$15. \$15. 15c. Vahicle Insurance. 15c. \$15.00 \$0.00 15c. Vahicle Insurance. 15c. \$15.0	5. Additional mortgage paym	ents for your residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection 6b. \$0.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$180,00 6d. Other, Specify: 7. \$334,00 7. Food and housekceping supplies 7. \$334,00 8. Childcare and children's education costs 8. \$0.00 9. Citothing, laundry, and dry cleaning 9. \$125,00 10. Personal care products and services 10. \$800,00 11. Medical and dental expenses 11. \$800,00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$350,00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15. \$0.00 15a. Life insurance deducted from your pay or included in lines 4 or 20. 15a. \$0.00 15c. Vehicle insurance 15a \$0.00 15c. Vehicle insurance 15a \$0.00 15c. Vehicle insurance 15a \$0.00 15c. Taxes Do not include taxes deducted from your pay or included in li	6. Utilities:			
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Do not include car payments 13. 13. 13. 13. 13. 13. 13. 13. 13. 14. 14. 14. 14. 14. 15. 14.	11. Medical and dental exper	nses	11.	\$60.00
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15c. Vehicle insurance	15a. Life insurance		15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance		15b	\$0.00
Specify:	15c. Vehicle insurance		15c	\$189.00
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17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Specify: 17d. Specify: 17d. Specify: 17d. Specify: 17d. Specify: 17d. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Your payments you make to support others who do not live with you. Specify: 20. Other payments you make to support others who do not live with you. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Specify: 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. Spo.00	17. Installment or lease paym	nents:		
17c. Other. Specify:	17a. Car payments for Vehic	le 1	17a	\$0.00
17d. Other. Specify:	17b. Car payments for Vehic	cle 2	17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:		17c	\$0.00
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Specify:			18.	
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20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00				
20d. Maintenance, repair, and upkeep expenses. 20d \$0.00		s, or renter's insurance		
			20e	\$0.00

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Debtor 1 Debra			Jackson	Case number (if known)		
First N	lame	Middle Name	Last Name			
21.Other. Spe	cify: Planet Fitness Gym I	Membership, Work U	niform & Shoes		21	\$95.00
	your monthly expenses.					\$2,483.00
22a. Add lir	es 4 through 21.			\$0.00		
22b. Copy	ine 22 (monthly expenses	for Debtor 2), if any,	from Official Form 106J-2			\$2,483.00
22c. Add lir	e 22a and 22b. The result	is your monthly exp	enses.		22.	
23. Calculate	our monthly net income).				
23a. Copy	ine 12 (your combined mo	onthly income) from S	Schedule I.		23a	\$2,493.18
23b. Copy	your monthly expenses fro	m line 22 above.			23b	\$2,483.00
	ct your monthly expenses		ncome.			\$10.18
The re	sult is your monthly net in	come.			23c	
For examp	le, do you expect to finish	paying for your car lo	ses within the year after pan within the year or do you nodification to the terms of	ou expect your		

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Fill in this information to identify your case:							
Debtor 1	Debra		Jackson				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)				
Case number (If known)			(Citato)				

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Pai	t 1: Sign Below	
	Did you pay or agree to pay someone who is NOT an attorney to h	elp you fill out bankruptcy forms?
	✓ No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Under penalty of perjury, I declare that I have read the summary a that they are true and correct.	and schedules filed with this declaration and
×	/s/ Debra Jackson	×
	Signature of Debtor 1	Signature of Debtor 2
	Date 5/4/2018	Date
	MM/DD/YYYY	MM/DD/YYYY

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Fill in th	is infor	mation to identify your c	ase:					
Debtor 1	1	Debra		Jackson				
Dalata	2	First Name	Middle I	Name Last Nam	ne			
Debtor 2 (Spouse, it		First Name	Middle I	Name Last Nam	ne			
United S	States E	ankruptcy Court for the:	Northern	District of Illino				
Case nu	ımber			(Sta	te)			
(If known)								Check if this is an
Offic	cial	Form 107						amended filing
State	me	nt of Financia	l Affairs f	or Individuals	Filing for	Bankru	ptcv	04/16
				arried people are filing				supplying correct
		f more space is neede own). Answer every qu		arate sheet to this form	. On the top of	any addition	nal pages, write	your name and case
	_							
Part 1:	Give	Details About Your	Marital Status	and Where You Lived	Before			
1. W	/hat is	your current marital sta	itus?					
	Maı	ried						
<u>-</u>	Not	married						
2. D	uring t	he last 3 years, have yo	u lived anywhere	other than where you li	ve now?			
	7 No							
	_	. List all of the places yo	u lived in the last	3 years. Do not include	where you live no	OW.		
	Deb	tor 1:		Dates Debtor 1 lived	Debtor 2:			Dates Debtor 2 lived
				there				there
					Same as	Debtor 1		Same as Debtor 1
	Nive	nber Street		From	Number Ctree			From
	- Null	Tiber Street		To	Number Stree	:L		То
	City	State	Zip Code		City	State	Zip Code	
					Same as	Debtor 1		Same as Debtor 1
	Nun	nber Street		From	Number Stree	.+		From
		Tibel Street						То
	City	State	Zip Code		City	State	Zip Code	
				ouse or legal equivalent				
and	d territoi	<i>ries</i> include Arizona, Califo	rnia, Idaho, Louis	iana, Nevada, New Mexico	, Puerto Rico, Tex	as, Washingto	n, and Wisconsin.)	
$\overline{\checkmark}$	No		d d. l. 22. 27	01.1.1	10011)			
т П	Yes. I	viake sure you till out So	cneaule H: Your	Codebtors (Official Form	IUbH).			

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Debtor 1 Debra Jackson Case number (if known) First Name Middle Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and (before deductions and Check all that apply. exclusions) exclusions) Wages, $\overline{\mathbf{A}}$ Wages, \$11797.88 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$27439.68 For last calendar year: commissions, commissions, (January 1 to December 31, 2017 bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$27000.00 For the calendar year before that: commissions, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips YYYY Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2017 YYYY For the calendar year before that: (January 1 to December 31, 2016

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Debtor 1 Debra Jackson Case number (if known) First Name Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Was this payment Total amount paid Amount you still owe for Mortgage 02/2018 \$1800.00 \$0.00 AMER EST FIN Creditor's Name Car 3515 N. Ridge Rd, Suite 200 Credit card Number Street Loan repayment Wichita Kansas 67205 Suppliers or City State Zip Code vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City Suppliers or State Zip Code vendors

Other

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	Debra			Jac	ckson	Case number	(if known)
	First Name		Middle Name	Las	t Name		
nsid orp gen	thin 1 year before you filed for bankruptcy, disiders include your relatives; any general partners reporations of which you are an officer, director, pent, including one for a business you operate as child support and alimony.		; relatives of any e erson in control,	general partners; par or owner of 20% or	tnerships of which y more of their voting	rou are a general partner; g securities; and any managing	
·	No Voc. List all payme	onto to a	, incidor				
_	Yes. List all payme	enis io ai	i irisider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Ī	Insider's Name						
Ī	Number Street						
_	City S	tate	Zip Code				
Ī	Insider's Name						
Ī	Number Street						
.	City S	tate	Zip Code				
insid Inclu		ebts guara	anteed or cosigned	d by an insider.	Total amount	Amount you still owe	n account of a debt that benefited an Reason for this payment
				, ,	·		Include creditor's name
Ī	Insider's Name						
Ī	Number Street						
_(City S	tate	Zip Code				
Ī	Insider's Name						
Ī	Number Street						
-	City Si	tate	Zin Code				

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Debtor 1 Debra Jackson Case number (if known) First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	tor 1 Debra	Jackson	Case number (if known)	
	First Name Middle Name	Last Name		
11.	accounts or refuse to make a payment because you		ank or financial institution, set off any am	ounts from your
	✓ No ☐ Yes. Fill in the details.			
		Describe the action the	creditor took Date action was taken	Amount
	Creditor's Name			
	Number Street			
	- Number Street	Last 4 digits of account n	umber: XXXX-	
	City State Zip Code			
12.	Within 1 year before you filed for bankruptcy, was a appointed receiver, a custodian, or another official?		oossession of an assignee for the benefit o	f creditors, a court-
	✓ No			
	Yes			
Part	15: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy, did	you give any gifts with a to	tal value of more than \$600 per person?	
	▼ No			
	Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift			
	Number Street			
	City State Zip Code			
	Person's relationship to you			
	Person to Whom You Gave the Gift			-
	- Grant to within 100 dave the dift			
	Number Street			
	City State Zip Code Person's relationship to you			

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	Debra		Jackson	Case number (if know	vn)	
	First Name	Middle Name	Last Name			
Wi	thin 2 years before you	filed for bankruptcy, die	d you give any gifts or contribut	ions with a total value	of more than \$600	to any charity?
V	No					
Ė	Yes. Fill in the details:	for each gift or contribut	tion.			
	•	-		1.1	D. L.	W.L.
	Gifts or contributions that total more than		Describe what you contrib	outea	Date you contributed	Value
	that total more than	φοσο			Continbuted	
			_			-
	Charity's Name					
	-		_			
			_			
	Number Street					
	City Sta	te Zip Code	-			
	Oity Oita	Δίρ σους				
6:	List Certain Losses	}				
		iled for bankruptcy or si	nce you filed for bankruptcy, di	d you lose anything bed	cause of theft, fire,	other disaster, or
gai	mbling?					
~	No					
Ħ	Yes. Fill in the details.					
ш		u vou loot and	Describe any incurance of	avarage for the lose	Data of your	Value of property
	Describe the property		Describe any insurance con Include the amount that insurance		Date of your loss	Value of property lost
		-	pending insurance claims or		.555	
			A/B: Property.			
Wit	out seeking bankruptcy	iled for bankruptcy, did / or preparing a bankrup	you or anyone else acting on youtcy petition? or credit counseling agencies for s			anyone you consult
Wit	thin 1 year before you fout seeking bankruptcy	iled for bankruptcy, did / or preparing a bankrup	otcy petition?			anyone you consult
Wit	thin 1 year before you foott seeking bankruptcy	iled for bankruptcy, did / or preparing a bankrup	otcy petition?			anyone you consult
Wit abo	thin 1 year before you fout seeking bankruptcy lude any attomeys, bankr No	iled for bankruptcy, did / or preparing a bankrup	otcy petition? or credit counseling agencies for s	ervices required in your b	ankruptcy.	
Wit abo	thin 1 year before you fout seeking bankruptcy lude any attomeys, bankr No	iled for bankruptcy, did / or preparing a bankrup	otcy petition?	ervices required in your b		Amount of payment
Wit abo	thin 1 year before you fout seeking bankruptcy lude any attomeys, bankr No	iled for bankruptcy, did / or preparing a bankrup	or credit counseling agencies for s Description and value of a	ervices required in your b	ankruptcy. Date payment	Amount of
Wit abo	thin 1 year before you fout seeking bankruptcy lude any attorneys, bank No Yes. Fill in the details.	iled for bankruptcy, did / or preparing a bankrup	or credit counseling agencies for s Description and value of a	ervices required in your b	ankruptcy. Date payment or transfer	Amount of
Wit abo	thin 1 year before you fout seeking bankruptcy lude any attorneys, bankl No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid	iled for bankruptcy, did / or preparing a bankrup	or credit counseling agencies for s Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
Wit abo	thin 1 year before you fout seeking bankruptcy lude any attorneys, bankl No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street	iled for bankruptcy, did / or preparing a bankrup	or credit counseling agencies for s Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
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Debtor	1 Debra		Jackson Cas	e number <i>(if known</i>)	
	First Name	Middle Name	Last Name		
h D	fithin 1 year before you filed elp you deal with your credit o not include any payment or No Yes. Fill in the details.	tors or to make paym		If pay or transfer any property	y to anyone who promised to
L	Tes. I ili ili tile details.				
			Description and value of any prope transferred	rty Date payment o transfer wa made	
	Person Who Was Paid				_
	Number Street				
	City State	Zip Code			
	No Yes. Fill in the details.		Description and value of property transferred	Describe any property or payments received or de in exchange	
	Person Who Received Tran	sfer			
	Number Street				
	City State Person's relationship to yo	Zip Code u			
	Person Who Received Tran	sfer			
	Number Street				
	City State Person's relationship to yo	Zip Code u			
b (T	fithin 10 years before you file eneficiary? These are often called asset-pro No Yes. Fill in the details.		d you transfer any property to a self-se	ttled trust or similar device o	f which you are a
L			Description and value of the prop	erty transferred	Date transfer was made
	Name of trust				

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Debtor 1 Debra Jackson Case number (if known) First Name Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code

City

State

Zip Code

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Debtor 1 Debra Jackson Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓** No Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code City State Zip Code

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Deb		Debra			Jack		Ca	se number <i>(i</i>	if known)	
		First Name		Middle Name	Last N	Name				
26.	Hav		/ in any judici	al or administr	ative proceed	ling under	any environme	ntal law? Ir	nclude settlements and o	rders.
		No Yes. Fill in the det	ails.							
					Court or agen	icy		Nature	of the case	Status of the case
		Case title			Court Name					Pending
		Case number			NumberStreet					On appeal
					City	State	Zip Code			Concluded
Pari	11:	Give Details Ab	oout Your B	usiness or Co	nnections to	o Any Bu	siness			
27.	Witl	nin 4 years before	you filed for b	ankruptcy, did	you own a bu	ısiness or	have any of the	following o	connections to any busine	ess?
							r activity, either	full-time or _l	part-time	
		A member of A partner in a		lity company (L	LC) or limited	liability pa	artnership (LLP)			
			-	aging executiv	e of a corpora	ation				
		An owner of a	at least 5% of	the voting or e	quity securitie	s of a corp	poration			
	✓	No. None of the a	bove applies	. Go to Part 12.						
		Yes. Check all that	at apply abov	e and fill in the	details below	for each b	ousiness.			
					Describ	e the natu	are of the busin	ess	Employer Identification include Social Security	
		Business Name			_				EIN:	
		Number Street			Name o	f account	ant or bookkee	Dates business existed per		
		City	State	Zip Code	_				From To	
					Describ	e the natu	ure of the busin	ess	Employer Identification include Social Security	
		Business Name			_				EIN:	
		Number Street			- Nama a	faccount	ant or bookkee	ner	Dates business existed	
		City	State	Zip Code		i account	ant or bookkee	per	From To	
					Describ	e the nati	ure of the busin	ess	Employer Identification include Social Security	
		Business Name			_				EIN:	
		Number Street			Name o	f account	ant or bookkee	per	Dates business existed	Ĭ
		City	State	Zip Code	_				From To	

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Debt	or 1 Debra			Jackson	Case number (if known)
	First Name		Middle Name	Last Name	<u> </u>
	creditors, or o	ther parties.	r bankruptcy, did y	ou give a financial statement	to anyone about your business? Include all financial institutions,
	Yes. Fill In	the details below.			
				Date issued	
	News			MM/DD/YYYY	
	Name			MINI/DD/ TTTT	
	Number	Street		_	
	City	State	Zip Code	_	
	Ciam Da				
Part	12: Sign Be	iow			
tı	rue and correc	t. I understand tha ase can result in fi	t making a false sta nes up to \$250,000,	tement, concealing property or imprisonment for up to 20	its, and I declare under penalty of perjury that the answers are y, or obtaining money or property by fraud in connection with years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		/s/ Debra Jacks			Signature of Debtor 2
		oignature of Beste			Date
		Date 5/4/2018			Date
	No Yes	, -		Financial Affairs for Individu	als Filing for Bankruptcy (Official Form 107)? nkruptcy forms?
	√ No				
	-	of noroon			Attach the Bankruptcy Petition Preparer's Notice,
L	Yes. Name	or person			Declaration and Cignoture (Official Form 110)

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Fill in this information to identify your case:						
Debtor 1	Debra		Jackson			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the:	Northern	District of Illinois			
			(State)			
Case number (If known)						

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.					
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?			
	Creditor's name: ACCEPTANCE NOW Description of property securing debt: Furniture Loan	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and	✓ No. Yes.			
	Creditor's name: Americredit Financial Services, dba GM Financial Description of property securing debt: Chevy Sonic Value: \$7,323.00	✓ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]:	✓ No. Yes.			
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and	No. Yes.			
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and	No. Yes.			

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Debtor	Debra		Jackson	Case number (if	
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpired I	Personal Property Leas	es		
informa	tion below. Do not list re		l leases are leases that	y Contracts and Unexpired Leases (Official Form 106G), fill in t are still in effect; the lease period has not yet ended. You ma 1 U.S.C. § 365(p)(2).	
Des	scribe your unexpired per	rsonal property leases		Will the lease be assumed?	
Les	sor's name:			□ No □ Yes	
	cription of leased perty:			_	
Les	sor's name:			□ No □ Yes	
	cription of leased perty:				
Les	sor's name:			□ No □ Yes	
	cription of leased perty:				
Les	sor's name:			□ No □ Yes	
	cription of leased perty:				
Les	sor's name:			□ No □ Yes	
	cription of leased perty:				
Les	sor's name:			□ No □ Yes	
	cription of leased perty:				
Les	sor's name:			□ No □ Yes	
	cription of leased perty:				
Part 3:	Sign Below				
Unde	-		my intention about any	property of my estate that secures a debt and any personal	
•	/o/ Dahma Jankara		×		
_	/s/ Debra Jackson gnature of Debtor 1		_	gnature of Debtor 2	
	ate 5/4/2018			ate MM/DD/YYYY	

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

		Northern Distric	t of Illinois	
n re	Debra Jackson		Case No.	
	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF C	OMPENSATION	OF ATTORNEY	FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed compensation paid to me within one ye rendered or to be rendered on behalf of	ar before the filing of the pe	etition in bankruptcy, or agreed	I to be paid to me, for services
	For legal services, I have agreed to acce	pt		\$1,500.00
	Prior to the filing of this statement I have	ve received		\$0.00
	Balance Due			\$1,500.00
2.	The source of the compensation paid to	o me was:		
	Debtor	Other (specify)		
3.	The source of the compensation paid to	o me is:		
	Debtor	Other (specify)		
4.	I have not agreed to share the abov members and associates of my law	e-disclosed compensation firm.	with any other person unless the	hey are
	I have agreed to share the above-di members or associates of my law fi the people sharing in the compensa	rm. A copy of the agreemer		
5.	In return for the above-disclosed fee, I h	nave agreed to render legal	service for all aspects of the ba	nkruptcy case, including:
	 a. Analysis of the debtor's financia bankruptcy; 	al situation, and rendering a	dvice to the debtor in determin	ing whether to file a petition in
	b. Preparation and filing of any pet	tition, schedules, statement	ts of affairs and plan which may	y be required;
	c. Representation of the debtor at	the meeting of creditors an	d confirmation hearing, and an	y adjourned hearings thereof;
6.	By agreement with the debtor(s), the abo	ove-disclosed fee does not	include the following services:	:
		CERTIFICA	TION	
	certify that the foregoing is a complete sor(s) in this bankruptcy proceedings.	statement of any agreement	or arrangement for payment to	o me for representation of the
	5/4/2018		/s/ Jeremy Nevel	
	Date		Signature of Attorney	
			Semrad Law Firm	
	_		Name of law firm	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1.717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Jackson, Debra	Case No	
	Debtor(s)		
		Chapter.	Chapter7
	VERIFICA	ATION OF CREDITOR MAT	RIX
Tr knowledge	ne above named Debtors hereby verify t e.	nat the attached list of creditors is tru	ue and correct to the best of their
Date:	5/4/2018	/s/ Jackson, Debra Jackson, Debra Signature of Debi	

ACCEPTANCE NOW 5501 Headquarters Dr ATTN: Acceptance Now Customer Service Plano, TX, 75024

PORTFOLIO RC 120 Corporate Boulevard Norfolk, VA, 23502

I C SYSTEM INC PO BOX 64378 SAINT PAUL, MN, 55164

AMERIMARK PO BOX 2845 MONROE, WI, 53566

AMER FST FIN 3515 N. Ridge Rd, Suite 200 Wichita, KS, 67205

WEBBNK/FHUT 6250 RIDGEWOOD ROA SAINT CLOUD, MN, 56303

Exeter Finance LLC PO BOX 166097 IRVING, TX, 75016

NISSAN MOTOR ACCEPTANC 2901 KINWEST PKWY IRVING, TX, 75063

CAP ONE 26525 N RIVERWOODS BLVD METTAWA, IL, 60045

CREDIT ONE BANK NA PO BOX 98875 LAS VEGAS, NV, 89193

Monroe & Main c/o Creditors Bankruptcy Service P.O. Box 800849 Dallas, TX, 75380 MDNGHT VLVT P.O. Box 800849 c/o M.E. Bennett Dallas, TX, 75380

Americredit Financial Services, dba GM Financial Po Box 183853 James Hogan, Jr. Arlington, TX, 76096

Montgomery Ward c/o Creditors Bankruptcy Service P.O. Box 800849 Dallas, TX, 75380

MONTGOMERYWD 1112 7th Ave. Monroe, WI, 53566

Direct Charge PO Box 800849 c/o Creditors Bankruptcy Service Dallas, TX, 75380

Peoples Gas Light & Coke Co. 200 E. Randolph St. Chicago, IL, 60601

ComEd 1919 Swift Drive Oak Brook, IL, 60523

Quantum3 Group LLC as agent for Comenity Bank PO Box 788 Attn: Dharminder S. Sandhu Kirkland, WA, 98083

LVNV Funding, LLC its successors and assign as assignee of FNBM, LLC PO Box 10587 c/o Resurgent Capital Services, Attn: Susan Gaines Greenville, SC, 29603

Portfolio Recovery Associates, LLC Successor to Citibank (Best Buy) POB 41067 Norfolk, VA, 23541

Midland Credit Management, Inc. as agent for Midland Funding LLC P.O. Box 2011 Warren, MI, 48090

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,500.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00 Motion to Reopen \$350.00 + court costs

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 05/04/2018

Client Olbu Sam

Client _____

Attorney Jenny my

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Debtor 1 Debra First Name	Jack Middle Name Last N		nown)
W. and all the state of the sta	estions for Reporting Purposes	vanic	•
16. What kind of debts do you have?	16a. Are your debts primarily con "incurred by an individual print No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily bus	marily for a personal, family, or hou siness debts? Business debts are o stment or through the operation of	debts that you incurred to obtain the business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that fund. No.		property is excluded and administrative cured creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49☐ 50-99☐ 100-199☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below	I have everyined this potition, and I	dealars under populty of periun, th	at the information provided is true and
For you	correct. If I have chosen to file under Chapt of title 11, United States Code. I ur under Chapter 7. If no attorney represents me and I cout this document, I have obtained I request relief in accordance with the I understand making a false statem.	ter 7, I am aware that I may proceed inderstand the relief available under did not pay or agree to pay someon I and read the notice required by 11 the chapter of title 11, United Statement, concealing property, or obtain e can result in fines up to \$250,000	I, if eligible, under Chapter 7, 11,12, or 13 each chapter, and I choose to proceed the who is not an attorney to help me fill U.S.C. § 342(b).
	/s/ Debra Jackson	m Sme *	
	Signature of Debtor 1		e of Debtor 2
	Executed on 5/4/2018 MM / DD / Y	YYY Execute	ed on

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Fill in this information to identify your case:						
Debtor 1	Debra		Jackson			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name	-		
United States B	ankruptcy Court for the:	Northern	District of Illinois (State)	_		
Case number (If known)			(3.0.0)	_		

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Parl	1: Sign Below						
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?						
	√ No						
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					
	Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and					
×	/s/ Debra Jackson Juliu Juliu Signature of Debtor 1	Signature of Debtor 2					
	Date 5/4/2018 MM/DD/YYYY	Date MM/DD/YYYY					

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Debtor :			*	Jackson	Case number (if known)
	First Name	M	iddle Name	Last Name	
	editors, or other	parties.	ankruptcy, did ye	ou give a financial state	ment to anyone about your business? Include all financial institutions,
	Yes. Fill in the o	details below.			
				Date issued	
	Name			MM/DD/YYYY	
	Number Stree	et		_	
				_	
	City	State	Zip Code	_	
Part 12	Sign Below				
a ba	×	an result in fines /s/ Debra Jackson	up to \$250,000,	or imprisonment for up	to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	g.				Date
	Date	e 5/4/2018			bate
Did	ividuals Filing for Bankruptcy (Official Form 107)?				
V	No				
	Yes				
Did	you pay or agree	to pay someone	who is not an at	torney to help you fill o	ut bankruptcy forms?
V	No				
	Yes. Name of per	son			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debto	r Debra		Jackson	Case number (if		
1	First Name	Middle Name	Last Name	known)		
Part 2:	List Your Unexpired Pers	sonal Property Leases)			
inform		utory Contracts and Unexpired Leases (Official Form 106G), fill in the that are still in effect; the lease period has not yet ended. You may t. 11 U.S.C. § 365(p)(2).	and the being as the might an each control or the control			
D	escribe your unexpired persona	al property leases		Will the lease be assumed?		
Le	essor's name:			□ No □ Yes		
	escription of leased operty:					
Le	essor's name:			□ No □ Yes	A A A A A A A A A A A A A A A A A A A	
	escription of leased operty:					
Le	essor's name:			☐ No ☐ Yes		
	escription of leased operty:					
Le	essor's name:			□ No □ Yes		
	escription of leased operty:					
Le	essor's name:			☐ No ☐ Yes		
	escription of leased operty:				han an ann an ann an an an an an an an an	
Le	essor's name:			□ No □ Yes		
	escription of leased operty:					
Le	essor's name:			□ No □ Yes		
	escription of leased operty:					
Part 3: Sign Below						
Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.						
		~				
	/s/ Debra Jackson Signature of Debtor 1	ou Suc	×	Signature of Debtor 2		
	Date 5/4/2018 MM/DD/YYYY			Date MM/DD/YYYY		

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Jackson, Debra Debtor(s)	Case No					
	Desicita	Chapter.	Chapter7				
	VE	RIFICATION OF CREDITOR MATE	RIX				
	The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.						
Date:	5/4/2018	/s/ Jackson, Debra Jackson, Debra Signature of Debto.	Vance 3				

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Debtor 1			Jackson	Case number (if known	n)
	First Name	Middle Name	Last Name	Caluma A	Column D
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse
		compensation		\$0.00	
unde	r the Social	amount if you contend that the am Security Act. Instead, list it here:	ount received was a bene	efit	
			\$0.00		
For y	our spouse		\$0.00		
9. Pens bene	ion or retire	ement income. Do not include any Social Security Act.	y amount received that w	as a \$ <u>0.00</u>	
amou paym intern	unt. Do not i rents receive national or de	Il other sources not listed above include any benefits received under d as a victim of a war crime, a crim omestic terrorism. If necessary, list total below.	the Social Security Act or e against humanity, or		
	amounts fro	om separate pages, if any.		+\$0.00	+
					=
11. Cal each	iculate you	r total current monthly income.	Add lines 2 through 10 fo	\$2,995.16 +	<u>\$2,995.16</u>
col	lumn. Then	add the total for Column A to the to	otal for Column B.		
					Total current
Part 2:	Determin	ne Whether the Means Test	Annlies to You		monthly income
- Annual State		current monthly income for the			
	The state of the s	otal current monthly income from li			ne 11 here → \$2,995.16
	Multiply by	12 (the number of months in a year	***************************************		X 12
12b.		your annual income for this part o	0.00		401
		,			12b. <u>\$35,941.92</u>
13 Calc	ulate the m	edian family income that applie	s to you. Follow these st	reps:	
- ::::-			Illinois		
Fill In	tne state in	which you live.			
Fill in	the number	of people in your household.			
	the median	family income for your state and si	ze of		13. \$52,410.00
To fir	nd a list of ap	oplicable median income amounts, iis form. This list may also be availa	go online using the link sable at the bankruptcy cle	specified in the separate rk's office.	
		es compare?	,		
14a.	Line 12	b is less than or equal to line 13. O	n the top of page 1, che	ck box 1, There is no presumption of a	buse.
14b.	Line 12			The presumption of abuse is determine	ed by Form 122A-2.
Part 3:	Sign Belo	ow			
Ву	signing here,	I declare under penalty of perjury t	hat the information on th	is statement and in any attachments is	true and correct.
x	/s/ Debra	Jackson July		×	
;	Signature of	Debtor 1		Signature of Debtor 2	
1	Date 5/4/20 MM/D	018 0D/YYYY		Date 5/4/2018 MM/DD/YYYY	
		d line 14a, do NOT fill out or file Fo d line 14b, fill out Form 122A-2 and			